

Welltag id: ALT 143

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Department of Ecology
Second Copy—Owner's Copy
Third Copy—Driller's Copy

WATER WELL REPORT

Start Card No. 40819

STATE OF WASHINGTON

Water Right Permit No.

(1) OWNER: Name JOHN MC BRADY Address 2331 N 136th SEATTLE, WA. 98148

(2) LOCATION OF WELL: County ISLAND NE 4 NE 4 Sec. 10 T. 31 N. R. 2E W.

(2a) STREET ADDRESS OF WELL (or nearest address) WEST CAMANO - CAMANO IS., WA 98292

(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐
☐ Irrigation ☐ Test Well ☐ Other ☐
☐ DeWater

(4) TYPE OF WORK: Owner's number of well (if more than one) _____

Abandoned <input type="checkbox"/>	New well <input checked="" type="checkbox"/>	Method: Dug <input type="checkbox"/>	Bored <input type="checkbox"/>
	Deepened <input type="checkbox"/>	Cable <input checked="" type="checkbox"/>	Driven <input type="checkbox"/>
	Reconditioned <input type="checkbox"/>	Rotary <input checked="" type="checkbox"/>	Jetted <input type="checkbox"/>

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 412 feet. Depth of completed well 412 ft.

(6) CONSTRUCTION DETAILS:

Casing installed ☒ 6" Diam. from _____ ft. to _____ ft.
Welded ☒ 6" Diam. from 42 ft. to 412 ft.
Liner installed ☐
Threaded ☐ Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒

Type of perforator used _____

SIZE of perforations _____ in. by _____ in.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☐ No ☒

Manufacturer's Name _____

Type _____ Model No. _____

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18 ft.
Material used in seal _____
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name UNKNOWN
Type: _____ H.P. _____

(8) **WATER LEVELS:** Land-surface elevation above mean sea level _____ ft. below top of well Date 2/1/91 n.
 Static level 240 n. below top of well Date _____
 Artesian pressure _____ lbs. per square inch Date _____
 Artesian water is controlled by _____ (Cap. valve, etc.)

(9) **WELL TESTS:** Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes ☐ No ☒ If yes, by whom? _____
 Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Airtest 20 gal./min. with stem set at 412 ft. for 2 hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☒

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and the thickness of aquifers and the kind and nature of the material in each stratum penetrated with at least one entry for each change of information.

MATERIAL	FROM	TO
TOP SOIL	0	8
HARD PAN	8	87
GRAVEL	87	148
BLUE CLAY & GRAVEL	148	158
TAN CLAY & GRAVEL	158	203
BROWN SAND & GRAVEL	203	295
HARD BLUE CLAY	295	330
BLUE SILT	330	340
BLUE CLAY	340	365
BLUE SILT	365	375
BROWN SAND & GRAVEL	375	382
BROWN CLAY	382	398
GRAY SAND & GRAVEL	398	412

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Work started 11/29/, 1941. Completed 2/4/, 1942

WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME WATKINS Well Drilling Co. (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address 556 N. SUNSET DR. CAMANO I.

(Signed) Ken Watkins License No. 0516
(WELL DRILLER)

Contractor's
Registration
No. 11607KIUW134PZ Date 2/9/, 199

(USE ADDITIONAL SHEETS IF NECESSARY)

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